

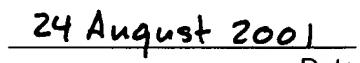
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Certificate of Mailing	
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I hereby certify under 37 C.F.R. § 1.10 that this correspondence is being deposited with the United States Postal Service as "Express Mail Post Office to Addressee" with sufficient postage on the date indicated above and is addressed to: BOX PATENT APPLICATION, Assistant Commissioner for Patents, Washington, D.C. 20231.	
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<b>UTILITY PATENT APPLICATION TRANSMITTAL UNDER 37 C.F.R. § 1.53(b)</b>	
Attorney Docket Number	00786/247003
Applicant	Brian Seed et al.
Title	TARGETED CYTOLYSIS OF HIV-INFECTED CELLS BY CHIMERIC CD4 RECEPTOR-BEARING CELLS
<b>PRIORITY INFORMATION:</b>	
This application is a continuation of United States patent application 09/218,950, filed December 22, 1998, which claims priority from United States patent application 08/284,391, filed August 2, 1994, which is a continuation-in-part of patent application 08/195,395, filed February 14, 1994, which is a continuation-in-part of patent application 07/847,566, filed March 6, 1992, which is a continuation-in-part of patent application 07/665,961, filed March 7, 1991.	
<b>SMALL ENTITY STATUS:</b>	
<input type="checkbox"/> Applicant claims small entity status under 37 C.F.R. § 1.27.	
<b>APPLICATION ELEMENTS:</b>	
Cover sheet	1 pages
Specification	86 pages
Claims	3 pages
Abstract	1 page
Drawing	27 sheets
Combined Declaration and POA, which is: <input type="checkbox"/> Unsigned; <input type="checkbox"/> Newly signed for this application; <input checked="" type="checkbox"/> A copy from prior application 08/284,391 and the entire disclosure of the prior application is considered as being part of the disclosure of this new application and is hereby incorporated by reference therein.	2 pages
Sequence Statement	
Sequence Listing on Paper	
Sequence Listing on Diskette	

Small Entity Statement, which is:	
<input type="checkbox"/> A copy from prior application [**SERIAL NUMBER**] and such small entity status is still proper and desired.	
Preliminary Amendment	
IDS	
Form PTO 1449	
Cited References	
Recordation Form Cover Sheet and Assignment	
English Translation	
Certified Copy of Priority Document	
Return Receipt Postcard	1
<b>FILING FEES:</b>	
Basic Filing Fee: \$710	
Excess Claims Fee: [**TOTAL**] - 20 x \$18	
Excess Independent Claims Fee: [**TOTAL**] - 3 x \$80	
Multiple Dependent Claims Fee: \$270	
Total Fees:	
<input type="checkbox"/> The filing fee is not being paid at this time. <input type="checkbox"/> Please apply any other charges, or any credits, to Deposit Account No. 03-2095.	
<b>CORRESPONDENCE ADDRESS:</b>	
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CUSTOMER NO: 21559	
 Signature	
 Date	

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